

DO/EO BIBLIOGRAPHIC DATA ENTRY

SERIAL NUMBER:	09 / 744569	RECEIPT DATE:	01 / 25 / 01
IA NUMBER:	PCT/ RU99 / 00009	IA FILING DATE:	01 / 18 / 00
FAMILY NAME:	ROVNER	DELAY WAIVED (Y/N):	N
GIVEN NAME:	YAKOV SHOEL-BEROVICH	DEMAND RECEIVED (Y/N):	N
PRIORITY CLAIMED (Y/N):	Y	PRIORITY DATE:	09 / 20 / 99
NO BASIC FEE (Y/N):	N	US DESIGNATED ONLY (Y/N):	N
ATTORNEY DOCKET NUMBER:	01006/HG	COUNTRY:	
CORRESPONDENCE NAME/ADDRESS:	CUSTOMER NUMBER:	000000	TELEPHONE 0000000000
			FAX
NAME:	FRSHAUUF HOLTZ GOODMAN LANGER & CHICK		
STREET:	25TH FLOOR		
	767 THIRD AVENUE		
CITY:	NEW YORK		
STATE/COUNTRY:	NY	ZIP:	100172023
EMAIL:			
APPLICATION TITLES:			
	MOBILE KARAKE SYSTEM, METHOD USAED TO PROVIDE ELECTROMAGNETIC COMPATIB		
	ITY FOR MOBILE KARACKA SYSTEM		

TAB TO LAST POSITION,PUSH SEND



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Bib Data Sheet

CONFIRMATION NO. 1509

SERIAL NUMBER 09/744,569	FILING DATE 01/25/2001 RULE	CLASS 370	GROUP ART UNIT 2661	ATTORNEY DOCKET NO. 01006/HG	
APPLICANTS Yakov Shoel-Berovich Rovner, Ostrovtsy, RUSSIAN FEDERATION; Marina Alekseevna Agadzhanova, Moscow, RUSSIAN FEDERATION;					
** CONTINUING DATA ***** THIS APPLICATION IS A 371 OF PCT/RU00/00009 01/18/2000					
** FOREIGN APPLICATIONS ***** RUSSIAN FEDERATION 99119818 09/20/1999					
IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ** ** 12/10/2001					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged _____ Examiner's Signature Initials		STATE OR COUNTRY RUSSIAN FEDERATION	SHEETS DRAWING 7	TOTAL CLAIMS 22	INDEPENDENT CLAIMS 6
ADDRESS Frishauf Holtz Goodman Langer & Chick 25th Floor 767 Third Avenue New York, NY 10017-2023					
TITLE Mobile karaoke system, method for ensuring electromagnetic compatibility of said karaoke system, mobile wireless transmitter for system, method for preventing the use of unauth horized cartridges and restraining unauthorized access to said system					
FILING FEE RECEIVED 638	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		